SUSHRUSA eClinic

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■ Professional Healthcare Services

■ +91-12345-67890 | ■ info@sushrusa. Time: 12:24

Date: 07/08/2025

PRESCRIPTION

■ 123 Health Street, Medical District, City - 123456

MEDICAL PRESCRIPTION

IENT INFORMATION		DOCTOR INFORMATION		
ent Name:	Smutika 64	Doctor Name:	Suryanshu kumar	
ent ID:	РАТРАТ029	Doctor ID:	DOCDOC025	
Gender:	0 years / male	Specialization:	General Medicine	
ne:	+918766048711	Registration No:	N/A	
il:	3trushanklohar.model@gmail.com	Phone:	+918249784701	

DIAGNOSIS

Primary: hii helloa howa s oaihlda sd Secondary: aisudas daksdhasl idhd

PRESCRIBED MEDICATIONS

S.No.	Medicine Name	Dosage (M-A-N)	Frequency	Duration	Instructions
1	adsasasd	1-2-1	Once Daily	8 days	aweEQWEADSi
2	ASDASD	1-1-1	Once Daily	8 days	SDAV WERAERSDASDASDAD

PATIENT INSTRUCTIONS

General Instructions: asdav asdasd

PRESCRIPTION STATUS: FINALIZED